

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
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41						
42						
43						
44						
45						
46	1					
47						
48						
49						
50						
TOTAL IND.			↓		↓	↓
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58	1					
59	1					
60						
61						
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97						
98						
99						
100						
TOTAL IND.		3		↓		
TOTAL DEP.		254	↔		↔	↔
TOTAL CLAIMS		257				

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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